

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 8/30/2011
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1.0	PHA Information PHA Name: <u>TOWN OF HEMPSTEAD HOUSING AUTHORITY</u> PHA Code: <u>NY046</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>01/2012</u>					
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 1309 Number of HCV units: 0					
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
					PH	HCV
	PHA 1:					
	PHA 2:					
	PHA 3:					
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.					
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: It is the Housing Authority's goal to provide eligible and qualified persons and families decent, safe and sanitary housing. The housing shall be provided in the most cost effective manner possible, in accordance with HUD's rules and regulations and all other applicable laws.					
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. <u>Goals</u> Increase availability of decent, safe and affordable housing by reducing vacancies and leveraging private or other public funds to create additional housing opportunities. Improve the quality of assisted housing by improving housing management in order to increase customer satisfaction by concentrating efforts in specific areas of finance, further computerization of management functions, modernizing public housing units and maintenance. Improve quality of life and economic vitality by implementing measures to deconcentrate poverty by bringing higher income families to lower income developments and putting in security improvements.					

6.0	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.</p> <p>Copies of the Annual PHA Plan and the 5-Year Plan may be obtained at the Town of Hempstead Housing Authority central office located at 760 Jerusalem Avenue, Uniondale, New York 11553.</p> <p>The following additional PHA Plan elements may be obtained at the location listed above:</p> <ol style="list-style-type: none"> 1. Eligibility, Selection and Admission Policies, including Deconcentration and Wait List Procedures 2. Financial Resources 3. Rent Determination 4. Operation and Management Procedures 5. Grievance Procedures 6. Designation of Housing for Elderly 7. Community Service and Self-Sufficiency 8. Safety and Crime Prevention 9. Pet Policy 10. Civil Rights Certifications 11. Fiscal Year Audit 12. Annual Operating Budget 13. Asset Management Plans 14. Violence Against Women Act 15. Smoking Policy
7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p>
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> <p>Attachment ny046a01—FY2012 Annual Statement Attachment ny046c01—FY2009 Annual Performance and Evaluation Report (Final) Attachment ny046d01---FY2010 Annual Performance and Evaluation Report Attachment ny046e01---ARRA Annual Performance and Evaluation Report</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p>Attachment ny046b01</p>
8.3	<p>Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>

Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.

9.0

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income <= 30% of AMI	80%	5	5	4	3	3	3
Income >30% but <=50% of AMI	74%	5	5	4	3	3	3
Income >50% but <80% of AMI	56%	5	5	4	3	3	3
Elderly	55%	5	5	4	4	3	3
Families with Disabilities	15%	5	5	4	5	3	3
Race/Ethnicity Hispanic	90%	5	5	4	3	3	3
Race/Ethnicity White (Not Hispanic)	72%	5	5	4	3	3	3
Race/Ethnicity Black/African American	90%	5	5	4	3	3	3
Race/Ethnicity American Indian/Alaska Native	0	1	1	1	1	1	1
Race/Ethnicity Asian	0	1	1	1	1	1	1
Race/Ethnicity Native Hawaiian/Other Pacific Islander	0	1	1	1	1	1	1

9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p> <p>The Town of Hempstead Housing Authority maintains a very high occupancy rate, ensuring that as many families as possible are being housed. We are attempting, through partnerships with other agencies, private developers and our not-for profit arm, to create additional housing opportunities within the jurisdiction and on the waiting list.</p> <p><u>Need: Shortage of affordable housing for all eligible populations</u></p> <p>Strategy 1: Maximize the number of affordable units available to the PHA within its current resources by:</p> <ol style="list-style-type: none"> 1. Employ effective management and maintenance policies to minimize the number of public housing units offline 2. Reduce number of days of turnover time for vacated public housing units 3. Reduce time to renovate public housing units 4. Participate in the Consolidated Plan development to ensure coordination with broader community strategies <p>Strategy 2: Increase number of affordable housing units by:</p> <ol style="list-style-type: none"> 1. Leverage affordable housing resources in the community through the creation of mixed finance housing 2. Pursue housing resources other than public housing or Section 8 tenant based assistance <p><u>Need: Specific Family Types: Families at or below 30% of median</u></p> <p>Strategy 1: Target available assistance to families at or below 50%</p> <ol style="list-style-type: none"> 1. Employ admissions preferences aimed at working families <p><u>Need: Specific Family Type: The Elderly</u></p> <p>Strategy 1: Target available assistance for elderly</p> <ol style="list-style-type: none"> 1. Seek designation of housing for the elderly <p><u>Need: Specific Family Types: Families with Disabilities</u></p> <p>Strategy 1: Target available assistance for Families with Disabilities</p> <ol style="list-style-type: none"> 1. Affirmatively market to local non-profit agencies that assist families with disabilities 2. Establish policies to maintain availability of handicapped accessible units for applicants who are physically challenged 3. Maintain modifications to housing sites and units for residents with disabilities 4. Seek some mechanism to be able to help populations with specific needs, especially battered women and men who need to be relocated <p><u>Need: Specific Family Types: Races or ethnicities with disproportionate housing needs</u></p> <p>Strategy 1: Increase awareness of PHA resources among families of races or ethnicities with disproportionate needs</p>
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10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p style="text-align: center;">Statement of Progress in Meeting 5-Year Plan Mission and Goals</p> <p>In its efforts to continue addressing its established mission, the Town of Hempstead Housing Authority has taken demonstrative steps to improve residents' sense of security, as well as their sense of pride and enjoyment of their surroundings and their desire for independence and self-sufficiency.</p> <p>After beginning our partnership with Town of Hempstead Workforce Investment Board, a consortium of agencies, both public and private, we had a computer installed in our office with a direct link to the Department of Labor's job bank. As part of the Workforce Investment Board, a Youth Board was formed, designed to provide career training and employment opportunities for young adults. Additionally, the Town of Hempstead Housing Authority Executive Director was asked to serve as Chairperson of the Youth Board.</p> <p>We applied for a ROSS Grant, in order to provide more diverse services to our senior residents in need. Unfortunately, that application was not successful. We are seeking other grant possibilities in an attempt to have additional services available when necessary.</p> <p>Having implemented our computerized Housing Inspection System and Work Order/ Repair System, we have continued to expand its uses. Work orders are now automatically generated following inspections; we have begun utilizing our work order system as part of our unit turnover process in order to more effectively monitor the repairs necessary to prepare an apartment for leasing. The results of these endeavors are heightened accountability on the part of our staff, making them far more aware of the time they are taking to complete an apartment before it can be released. We have also linked our work order system to our computerized inventory. This provides us with needed ability to maintain a current inventory and cost analysis necessary for asset management.</p> <p>We continue to seek ways to increase our residents' feelings of security. Although we have increased site lighting, replaced exterior doors at almost all our sites (the remaining two will be completed shortly), increased Town of Hempstead Public Safety and Nassau County Police patrols, the most frequently asked questions continue to be about safety, although crime is virtually non-existent on our sites. Having consulted counselors specializing in geriatric care, we find that feelings of insecurity and fear are not uncommon in elderly people, regardless of their environment. Seniors are also frequently a target for con artists. Should we successfully move forward with our partnership with Nassau University Medical Center, we will work to incorporate this topic in the counseling provided to our residents. Neighborhood changes in various locations have contributed to residents' uneasiness, as well. This area will continue to be a high priority with us. A program of On-Site Resident Meetings utilizing speakers from the Nassau County Police Department, Town of Hempstead Departments of Public Safety and Senior Enrichment, local firefighters and speakers with other specialties is being reintroduced in our efforts to increase communication with our residents and ease their concerns.</p> <p>We have made tremendous strides in refurbishing common areas, in order to promote socialization and encourage residents to participate in the wide range of offerings in the Community Buildings. We have been concentrating on community buildings and exterior as a priority this year by modernizing and refurbishing them; grounds have been landscaped and had new lighting installed to give the areas not only a heightened feeling of safety, but also to give them a true park-like atmosphere. We will, hopefully, be able to further our efforts outside by upgrading the seating areas.</p> <p>Community buildings continue to be refurbished a few at a time. As the residents spend a considerable amount of time utilizing these facilities, we feel improving the atmosphere will help improve the spirit and attitude of our residents. A partnership with the Town of Hempstead has enabled us to expand the kitchen facilities at one of our sites. We will continue to explore other ways of utilizing Town of Hempstead departments.</p> <p>We are continuing to explore providing additional housing to accommodate our very lengthy waiting list. Our newly formed not-for-profit corporation, Meadowbrook Development Corporation, is also seeking partnerships with other agencies in order to begin developing new housing.</p> <p>Having regained our financial stability, we will continue to monitor expenditures, without reducing service to residents. This year, we have been able to return to our apartment painting cycle. Half of our sites are currently being painted, with the other half scheduled for next year. By securing a series of weatherization grants, we have been able to upgrade both our heating and physical plants on a much faster schedule than we had originally thought possible. The weatherization grants have also assisted us with achieving a much more energy efficient housing authority and thereby reducing our expenditure of funds on utilities.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>Our definition of Substantial Deviation/Modification or Significant Amendment is as follows:</p> <p>The Town of Hempstead Housing Authority anticipates that it may need to make changes to its Physical Needs Assessment and/or Capital Fund Plans and expenditures from time to time (including, but not limited to a change in the use of funds under Capital Fund) and such changes shall not be deemed to be a substantial deviation or significant amendment or modification to the Annual Plan.</p>
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11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <ul style="list-style-type: none"> (a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. (g) Challenged Elements (h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)
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This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

Instructions form HUD-50075

Applicability. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

5.1 Mission. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.

5.2 Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.

6.0 PHA Plan Update. In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:

- (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.

- (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

PHA Plan Elements. (24 CFR 903.7)

1. **Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.
2. **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
3. **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
4. **Operation and Management.** A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.

5. **Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
6. **Designated Housing for Elderly and Disabled Families.** With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: **1)** development name and number; **2)** designation type; **3)** application status; **4)** date the designation was approved, submitted, or planned for submission, and; **5)** the number of units affected.
7. **Community Service and Self-Sufficiency.** A description of: **(1)** Any programs relating to services and amenities provided or offered to assisted families; **(2)** Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; **(3)** How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. **(Note: applies to only public housing).**
8. **Safety and Crime Prevention.** For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: **(i)** A description of the need for measures to ensure the safety of public housing residents; **(ii)** A description of any crime prevention activities conducted or to be conducted by the PHA; and **(iii)** A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.
9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.
12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
13. **Violence Against Women Act (VAWA).** A description of: **1)** Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; **2)** Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and **3)** Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence,

dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers

- (a) **Hope VI or Mixed Finance Modernization or Development.** **1)** A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and **2)** A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>
- (b) **Demolition and/or Disposition.** With respect to public housing projects owned by the PHA and subject to ACCs under the Act: **(1)** A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and **(2)** A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm
Note: This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed.
- (c) **Conversion of Public Housing.** With respect to public housing owned by a PHA: **1)** A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or that the public housing agency plans to voluntarily convert; **2)** An analysis of the projects or buildings required to be converted; and **3)** A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/centers/sac/conversion.cfm>
- (d) **Homeownership.** A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) **Project-based Vouchers.** If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.

8.0 Capital Improvements. This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.

8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. PHAs must complete the *Capital Fund Program Annual Statement/Performance and Evaluation Report* (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:

- (a) To submit the initial budget for a new grant or CFFP;

- (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
- (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

1. At the end of the program year; until the program is completed or all funds are expended;
2. When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
3. Upon completion or termination of the activities funded in a specific capital fund program year.

8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

8.3 Capital Fund Financing Program (CFFP). Separate, written HUD approval is required if the PHA proposes to pledge any portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:
<http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm>

9.0 Housing Needs. Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. **(Note:** Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).

9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. **(Note:** Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).

10.0 Additional Information. Describe the following, as well as any additional information requested by HUD:

- (a) **Progress in Meeting Mission and Goals.** PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**
- (b) **Significant Amendment and Substantial Deviation/Modification.** PHA must provide the definition of "significant amendment" and "substantial deviation/modification". **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)**
- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. **(Note: Standard and Troubled PHAs complete annually).**

11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)*
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)*
- (d) Form SF-LLL, *Disclosure of Lobbying Activities (PHAs receiving CFP grants only)*
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)*
- (f) Resident Advisory Board (RAB) comments.
- (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.1.
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.2.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 8/31/2011

Part I: Summary					
PHA Name: Town of Hempstead Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY36P04650112 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2012 FFY of Grant Approval:
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	100,000			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	79,977			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	50,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	111,000			
10	1460 Dwelling Structures	874,220			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	75,000			
13	1475 Non-dwelling Equipment	55,500			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

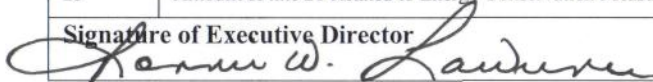
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 08/31/2011

Part I: Summary					
PHA Name: Town of Hempstead Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY36P04650112 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant:2012 FFY of Grant Approval:	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)	1,345,697			
20	Amount of Annual Grant:: (sum of lines 2 - 19)				
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director 		Date 10/13/2011		Signature of Public Housing Director _____	
				Date _____	

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority			Grant Type and Number Capital Fund Program Grant No: NY36P04650112 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2012		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY046000001	Upgrade Community Building	1470		25,000				
NewbridgeGardens	Upgrade Parking Lot	1450		5,000				
	Upgrade Infestation Prevention	1460		5,000				
	Upgrade Heating & Plumbing Systems	1460		6,000				
	Upgrade Building Entrances	1460		1,220				
	Replace Grounds Mtce Equipment	1475		750				
NY046000002	Upgrade Infestation Prevention	1460		5,000				
Green Acres	Refurbish Apartments	1460		10,000				
	Refurbish Hallways	1460		10,000				
	Upgrade Parking Lots	1450		8,000				
	Upgrade Roofing System	1460		5,000				
	Upgrade Heating & Plumbing Systems	1460		4,000				
	Replace Grounds Mtce Equipment	1475		750				
NY46000003	Upgrade Heating System	1460		50,000				
Park Gardens	Replace Windows	1460		25,000				
	Replace Bldg Entrance Doors	1460		25,000				
	Upgrade Infestation Prevention	1460		5,000				
	Upgrade Heating & Plumbing Systems	1460		6,000				
	Upgrade Parking Lots	1450		10,000				
	Replace Grounds Mtce Equipment	1475		750				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority			Grant Type and Number Capital Fund Program Grant No: NY36P04650112 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2012		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY046000003	Upgrade Infestation Prevention	1460		5,000				
Centennial Gardens	Upgrade Parking Lots	1450		8,000				
	Upgrade Heating & Plumbing Systems	1460		5,000				
	Replace Windows	1460		10,000				
	Replace Grounds Mtce Equipment	1475		750				
NY046000004	Upgrade Infestation Prevention	1460		5,000				
Bayview	Upgrade Heating & Plumbing Systems	1460		5,000				
Gardens	Upgrade Parking Lot	1450		8,000				
	Upgrade Roofing System	1460		10,000				
	Structural Stabilization	1460		5,000				
	Replace Grounds Mtce Equipment	1475		750				
NY046000004	Upgrade Infestation Prevention	1460		5,000				
Inwood Gardens	Refurbish Apartments	1460		10,000				
	Upgrade Heating & Plumbing System	1460		8,000				
	Upgrade Parking Lot	1450		4,000				
	Replace Grounds Mtce Equipment	1475		750				
NY046000005	Upgrade Infestation Prevention	1460		5,000				
Brookside	Upgrade Heating & Plumbing System	1460		5,000				
Gardens	Structural Stabilization	1460		25,000				
	Upgrade Parking Lot	1450		10,000				
	Replace Grounds Mtce Equipment	1475		750				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY36P04650112 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2012			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY046000005	Upgrade Infestation Prevention	1460		5,000				
Meadowbrook	Refurbish Apartments	1460		10,000				
Gardens	Refurbish Hallways	1460		10,000				
	Upgrade Parking Lots	1450		15,000				
	Upgrade Heating & Plumbing System	1460		5,000				
	Replace Office Equipment	1475		20,000				
	Replace Grounds Mtce Equipment	1475		750				
NY046000006	Upgrade Infestation Prevention	1460		5,000				
Mill River Gardens	Upgrade Fencing	1450		5,000				
	Upgrade Parking Lot	1450		10,000				
	Upgrade Air Conditioning	1470		10,000				
	Upgrade Heating & Plumbing System	1460		5,000				
	Replace Grounds Mtce Equipment	1475		750				
NY046000007	Upgrade Infestation Prevention	1460		5,000				
Bellmore Gardens	Upgrade Community Building	1470		25,000				
	Upgrade Parking Lots	1450		5,000				
	Upgrade Heating & Plumbing Systems	1460		10,000				
	Replace Windows	1460		15,000				
	Replace Grounds Mtce Equipment	1475		750				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY36P04650112 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2012			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY046000008	Refurbish Apartments	1460		10,000				
Westover Gardens	Upgrade Heating & Plumbing System	1460		40,000				
	Upgrade Infestation Prevention	1460		5,000				
	Upgrade Parking Lot	1450		10,000				
	Upgrade Community Center	1470		10,000				
	Upgrade Roofing	1460		10,000				
	Replace Grounds Mtce. Equipment	1475		750				
NY046000009	Upgrade Boiler Rooms	1460		410,000				
Dogwood Terrace	Upgrade Infestation Prevention	1460		5,000				
	Upgrade Parking Lot	1450		3,000				
	Upgrade Heating & Plumbing System	1460		4,000				
	Refurbish Apartments & Hallways	1460		20,000				
	Replace Grounds Mtce. Equipment	1475		750				
NY046000010	Upgrade Infestation Prevention	1460		5,000				
Eastover Gardens	Upgrade Heating & Plumbing System	1460		5,000				
	Upgrade Community Center	1470		5,000				
	Refurbish Apartments & Hallways	1460		20,000				
	Replace Grounds Mtce. Equipment	1475		750				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY36P04650112 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2012			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY046000011	Upgrade Infestation Prevention	1460		5,000				
Salisbury Gardens	Upgrade Parking Lot	1450		10,000				
	Upgrade Heating & Plumbing System	1460		5,000				
	Replace Vehicles	1475		25,000				
	Replace Grounds Mtce. Equipment	1475		750				
Pha-Wide Operations	Provide funds for Operation of CFP Program	1406		100,000				
Administration	Provide Necessary Advertisements	1410		5,000				
	Provide Necessary Staff Support	1410		74,977				
Fees and Costs	HUD and State Requirements	1430		50,000				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Town of Hempstead Housing Authority					Federal FFY of Grant: 2012
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
NY046000001 Newbridge Gardens	9/2013		9/2015		
NY046000002 Green Acres	9/2013		9/2015		
NY046000003 Park Gardens Centennial Gardens	9/2013		9/2015		
NY046000004 Bayview Gardens Inwood Gardens	9/2013		9/2015		
NY046000005 Brookside Gardens Meadowbrook Gdns.	9/2013		9/2015		
NY046000006 Mill River Gardens	9/2013		9/2015		
NY046000007 Bellmore Gardens	9/2013		9/2015		
NY046000008 Westover Gardens	9/2013		9/2015		

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: TOWN OF HEMPSTEAD HOUSING AUTHORITY					Federal FFY of Grant: 2012
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
NY046000009 Dogwood Terrace	9/2013		9/2015		
NY046000010 Eastover Gardens	9/2013		9/2015		
NY046000011 Salisbury Gardens	9/2013		9/2015		
PHA Wide Operations	9/2013		9/2015		
PHA Wide Administration	9/2013		9/2015		
Fees and Costs	9/2013		9/2015		
Non Dwelling Equipment	9/2013		9/2015		

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 08/30/2011

Part I: Summary						
PHA Name/Number NY046		Locality (City/County & State) Town of Hempstead/Nassau County, NY			XOriginal 5-Year Plan	Revision No:
A.	Development Number and Name Town of Hempstead Housing Authority	Work Statement for Year 1 FFY 2012 Annual Statement	Work Statement for Year 2 FFY 2013	Work Statement for Year 3 FFY 2014	Work Statement for Year 4 FFY 2015	Work Statement for Year 5 FFY 2016
B.	Physical Improvements	1450/1460	710,000	710,000	710,000	710,000
C.	Dwelling Equipment	1465	70,000	70,000	70,000	70,000
D.	PHA-Wide Non-dwelling Structures	1470/1475	102,000	102,000	102,000	102,000
E.	Administration	1410	134,557	134,557	134,557	134,557
F.	Other	1430	60,000	60,000	60,000	60,000
G.	Operations	1406	269,140	269,140	269,140	269,140
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds	1,345,697	1,345,697	1,345,697	1,345,697	1,345,697
L.	Total Non-CFP Funds					
M.	Grand Total					

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary (Continuation)				
PHA Name/Number: Town of Hempstead Housing Authority Locality (City/County & State) Town of Hemp/Nassau County, NY <input checked="" type="checkbox"/> Original 5-Year Plan Revision No:				
Development Number And Name	Work Statement for Year 2 FFY 2013	Work Statement for Year 3 FFY 2014	Work Statement for Year 4 FFY 2015	Work Statement for Year 5 FFY 2016
AMP NUMBER	Year 1 FFY 2012			
	Annual Statement			
NY046000001	96,000	96,000	96,000	96,000
NY046000002	96,000	96,000	96,000	96,000
NY046000003	192,565	192,565	192,565	192,565
NY046000004	192,565	192,565	192,565	192,565
NY046000005	192,565	192,565	192,565	192,565
NY046000006	96,000	96,000	96,000	96,000
NY046000007	96,000	96,000	96,000	96,000
NY046000008	96,000	96,000	96,000	96,000
NY046000009	96,000	96,000	96,000	96,000
NY046000010	96,000	96,000	96,000	96,000
NY046000011	96,000	96,000	96,000	96,000

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY	Work Statement for Year 2013 FFY 2013			Work Statement for Year FFY 2014		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	1406 Operations		269,140	1406 Operations		269,140
Annual						
Statement	1410 Administration		134,557	1410 Administration		134,557
	1430 Fees and Costs A & E Services		25,000	1430 Fees and Costs A & E Services		25,000
	Consultant		35,000	Consultant		35,000
	1450 Site Improvement			1450 Site Improvement		
	NY046000001 Landscaping/Paving		7,500	NY046000001 Landscaping/Paving		7,500
	NY046000001 Upgrade Exterior Lighting		3,500	NY046000001 Upgrade Site Drainage		3,500
	NY046000002 Landscaping/Paving		7,500	NY046000002 Landscaping/Paving		7,500
	NY046000002 Upgrade Exterior Lighting		3,500	NY046000002 Upgrade Site Drainage		3,500
	NY046000003 Landscaping/Paving		15,000	NY046000003 Landscaping/Paving		15,000
	NY046000003 Upgrade Exterior Lighting		9,000	NY046000003 Upgrade Site Drainage		7,000
	NY046000004 Landscaping/Paving		15,000	NY046000004 Landscaping/Paving		
	NY046000004 Upgrade Exterior Lighting		9,000	NY046000004 Upgrade Site Drainage		7,000
	NY046000005 Landscaping/Paving		15,000	NY046000005 Landscaping/Paving		
	NY046000005 Upgrade Exterior Lighting		9,000	NY046000005 Upgrade Site Drainage		7,000
	NY046000006 Landscaping/Paving		7,500	NY046000006 Landscaping/Paving		7,500
	NY046000006 Upgrade Exterior Lighting		3,500	NY046000006 Upgrade Bulkhead/Site		54,500
	Subtotal of Estimated Cost		\$	Subtotal of Estimated Cost		\$

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY _____	Work Statement for Year 2013				Work Statement for Year: 2014			
	FFY 2013				FFY 2014			
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost		Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	
See	NY046000007 Landscaping/Paving		7,500		NY046000007 Landscaping/Paving		7,500	
Annual	NY046000007 Upgrade Exterior Lighting		3,500		NY046000007 Upgrade Site Drainage		3,500	
Statement	NY046000008 Landscaping/Paving		7,500		NY046000008 Landscaping/Paving		7,500	
	NY046000008 Upgrade Exterior Lighting		3,500		NY046000008 Upgrade Site Drainage		3,500	
	NY046000009 Landscaping/Paving		7,500		NY046000009 Landscaping/Paving		7,500	
	NY046000009 Upgrade Exterior Lighting		3,500		NY046000009 Upgrade Site Drainage		3,500	
	NY046000010 Landscaping/Paving		7,500		NY046000010 Landscaping/Paving		7,500	
	NY046000010 Upgrade Exterior Lighting		3,500		NY046000010 Upgrade Site Drainage		3,500	
	NY046000011 Landscaping/Paving		7,500		NY046000011 Landscaping/Paving		7,500	
	NY046000011 Upgrade Exterior Lighting		3,500		NY046000011 Upgrade Site Drainage		3,500	
	1460 Dwelling Structures				1460 Dwelling Structures			
	NY046000001 Interior Lighting		3,500		NY046000001 Heating/Plumbing/Piping		8,500	
	NY046000001 Refurbish Apartments/Hallways		8,500		NY046000001 Refurbish Apartments/Hallway		4,500	
	NY046000001 Infestation Prevention		8,500		NY046000001 Infestation Prevention		4,500	
	NY046000001 Roofing/Gutters/Leaders/Soffits		15,500		NY046000001 Structural Stabilization		8,500	
	NY046000001 AC Sleeves		3,500		NY046000001 Upgrade Kitchens		13,500	
	NY046000002 Interior Lighting		3,500		NY046000002 Heating/Plumbing/Piping		8,500	
	NY046000002 Refurbish Apartments/Hallways		8,500		NY046000002 Refurbish Apartments/Hallway		4,500	
	NY046000002 Infestation Prevention		8,500		NY046000002 Infestation Prevention		4,500	
	Subtotal of Estimated Cost		\$		Subtotal of Estimated Cost		\$	

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY	Work Statement for Year 2013		Work Statement for Year: 2014	
	FFY 2013		FFY 2014	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	NY046000002 Roofing/Gutters/Leaders/Soffits	15,500	NY046000002 Structural Stabilization	8,500
Annual	NY046000002 AC Sleeves	3,500	NY046000002 Upgrade Kitchens	13,500
Statement	NY046000003 Interior Lighting	9,000	NY046000003 Heating/Plumbing/Piping	14,000
	NY046000003 Refurbish Apartments/Hallways	14,000	NY046000003 Refurbish Apartments/Hallways	8,000
	NY046000003 Infestation Prevention	14,000	NY046000003 Infestation Prevention	8,000
	NY046000003 Roofing/Gutters/Leaders/Soffits	32,000	NY046000003 Structural Stabilization	14,000
	NY046000003 AC Sleeves	9,000	NY046000003 Upgrade Kitchens	19,000
	NY046000004 Interior Lighting	9,000	NY046000004 Heating/Plumbing/Piping	14,000
	NY046000004 Refurbish Apartments/Hallways	14,000	NY046000004 Refurbish Apartments/Hallways	8,000
	NY046000004 Infestation Prevention	14,000	NY046000004 Infestation Prevention	8,000
	NY046000004 Roofing/Gutters/Leaders/Soffits	32,000	NY046000004 Structural Stabilization	14,000
	NY046000004 AC Sleeves	9,000	NY046000004 Upgrade Kitchens	19,000
	NY046000005 Interior Lighting	9,000	NY046000005 Heating/Plumbing/Piping	14,000
	NY046000005 Refurbish Apartments/Hallways	14,000	NY046000005 Refurbish Apartments/Hallways	8,000
	NY046000005 Infestation Prevention	14,000	NY046000005 Infestation Prevention	8,000
	NY046000005 Roofing/Gutters/Leaders/Soffits	32,000	NY046000005 Structural Stabilization	14,000
	NY046000005 AC Sleeves	9,000	NY046000005 Upgrade Kitchens	19,000
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY	Work Statement for Year 2013		Work Statement for Year: 2014	
	FFY 2013		FFY 2014	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	NY046000006 Interior Lighting	3,500	NY046000006 Heating/Plumbing/Piping	8,500
Annual	NY046000006 Refurbish Apartments/Hallways	8,500	NY046000006 Refurbish Apartments/Hallway	4,500
Statement	NY046000006 Infestation Prevention	8,500	NY046000006 Infestation Prevention	4,500
	NY046000006 Roofing/Gutters/Leaders/Soffits	15,500	NY046000006 Structural Stabilization	8,500
	NY046000006 AC Sleeves	3,500	NY046000006 Upgrade Kitchens	13,500
	NY046000007 Interior Lighting	3,500	NY046000007 Heating/Plumbing/Piping	8,500
	NY046000007 Refurbish Apartments/Hallways	8,500	NY046000007 Refurbish Apartments/Hallway	4,500
	NY046000007 Infestation Prevention	8,500	NY046000007 Infestation Prevention	4,500
	NY046000007 Roofing/Gutters/Leaders/Soffits	15,500	NY046000007 Structural Stabilization	8,500
	NY046000007 AC Sleeves	3,500	NY046000007 Upgrade Kitchens	13,500
	NY046000008 Interior Lighting	3,500	NY046000008 Heating/Plumbing/Piping	8,500
	NY046000008 Refurbish Apartments/Hallways	8,500	NY046000008 Refurbish Apartments/Hallway	4,500
	NY046000008 Infestation Prevention	8,500	NY046000008 Infestation Prevention	4,500
	NY046000008 Roofing/Gutters/Leaders/Soffits	15,500	NY046000008 Structural Stabilization	8,500
	NY046000008 AC Sleeves	3,500	NY046000008 Upgrade Kitchens	13,500
	NY046000009 Interior Lighting	3,500	NY046000009 Heating/Plumbing/Piping	8,500
	NY046000009 Refurbish Apartments/Hallways	8,500	NY046000009 Refurbish Apartments/Hallway	4,500
	NY046000009 Infestation Prevention	8,500	NY046000009 Infestation Prevention	4,500
	NY046000009 Roofing/Gutters/Leaders/Soffits	15,500	NY046000009 Structural Stabilization	8,500
	NY046000009 AC Sleeves	3,500	NY046000009 Upgrade Kitchens	13,500
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY	Work Statement for Year FFY 2013			Work Statement for Year 2014		
	2013		Quantity	FFY 2014		Quantity
	Development Number/Name General Description of Major Work Categories	Estimated Cost		Development Number/Name General Description of Major Work Categories	Estimated Cost	
See	NY046000010 Interior Lighting	3,500		NY046000010 Heating/Plumbing/Piping	8,500	
Annual	NY046000010 Refurbish Apartments/Hallways	8,500		NY046000010 Refurbish Apartments/Hallway	4,500	
Statement	NY046000010 Infestation Prevention	8,500		NY046000010 Infestation Prevention	4,500	
	NY046000010 Roofing/Gutters/Leaders/Soffits	15,500		NY046000010 Structural Stabilization	8,500	
	NY046000010 AC Sleeves	3,500		NY046000010 Upgrade Kitchens	13,500	
	NY046000011 Interior Lighting	3,500		NY046000011 Heating/Plumbing/Piping	8,500	
	NY046000011 Refurbish Apartments/Hallways	8,500		NY046000011 Refurbish Apartments/Hallway	4,500	
	NY046000011 Infestation Prevention	8,500		NY046000011 Infestation Prevention	4,500	
	NY046000011 Roofing/Gutters/Leaders/Soffits	15,500		NY046000011 Structural Stabilization	8,500	
	NY046000011 AC Sleeves	3,500		NY046000011 Upgrade Kitchens	13,500	
	1465 Dwelling Equipment			1465 Dwelling Equipment		
	NY046000001 Stoves/Refrigerators/Generators	5,000		NY046000001 Stoves/Refrigerators/Generators	5,000	
	NY046000002 Stoves/Refrigerators/Generators	5,000		NY046000002 Stoves/Refrigerators/Generators	5,000	
	NY046000003 Stoves/Refrigerators/Generators	10,000		NY046000003 Stoves/Refrigerators/Generators	10,000	
	NY046000004 Stoves/Refrigerators/Generators	10,000		NY046000004 Stoves/Refrigerators/Generators	10,000	
	NY046000005 Stoves/Refrigerators/Generators	10,000		NY046000005 Stoves/Refrigerators/Generators	10,000	
	NY046000006 Stoves/Refrigerators/Generators	5,000		NY046000006 Stoves/Refrigerators/Generators	5,000	
	NY046000007 Stoves/Refrigerators/Generators	5,000		NY046000007 Stoves/Refrigerators/Generators	5,000	
	NY046000008 Stoves/Refrigerators/Generators	5,000		NY046000008 Stoves/Refrigerators/Generators	5,000	
	NY046000009 Stoves/Refrigerators/Generators	5,000		NY046000009 Stoves/Refrigerators/Generators	5,000	
	Subtotal of Estimated Cost			Subtotal of Estimated Cost		\$

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY _____	Work Statement for Year 2013			Work Statement for Year: 2014		
	FFY 2013			FFY 2014		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	NY046000010 Stoves/Refrigerators/Generators		5,000	NY046000010		5,000
Annual	NY046000011 Stoves/Refrigerators/Generators		5,000	NY046000011		5,000
Statement						
	1470 Non-Dwelling Structures		5,500	1470 Non-Dwelling Structures		
	NY046000001 Community Building		5,500	NY046000001 Community Building		5,500
	NY046000002 Community Building		11,000	NY046000002 Community Building		5,500
	NY046000003 Community/Mtce Building		11,000	NY046000003 Community/Mtce Building		11,000
	NY046000004 Community Building		11,000	NY046000004 Community Building		11,000
	NY046000005 Community/Admin Building		5,500	NY046000005 Community/Admin Building		11,000
	NY046000006 Community Building		5,500	NY046000006 Community Building		5,500
	NY046000007 Community Building		5,500	NY046000007 Community Building		5,500
	NY046000008 Community Building		5,500	NY046000008 Community Building		5,500
	NY046000009 Community Building		5,500	NY046000009 Community Building		5,500
	NY046000010 Community Building		5,500	NY046000010 Community Building		5,500
	NY046000011 Community Building			NY046000011 Community Building		5,500
	1475 Non-Dwelling Equipment			1475 Non-Dwelling Equipment		
	Maintenance/Office Equipment/Vehicles		25,000	Maintenance/Office Equipment/Vehicles		25,000
	Subtotal of Estimated Cost		\$	Subtotal of Estimated Cost		\$

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY	Work Statement for Year 2015			Work Statement for Year FFY 2016		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	1406 Operations		269,140	1406 Operations		269,140
Annual						
Statement	1410 Administration		134,557	1410 Administration		134,557
	1430 Fees and Costs A & E Services		25,000	1430 Fees and Costs A & E Services		25,000
	Consultant		35,000	Consultant		35,000
	1450 Site Improvement			1450 Site Improvement		
	NY046000001 Landscaping/Paving		7,500	NY046000001 Landscaping/Paving		7,500
	NY046000001 Fencing		3,500	NY046000001 Sprinklers		3,500
	NY046000002 Landscaping/Paving		7,500	NY046000002 Landscaping/Paving		7,500
	NY046000002 Fencing		3,500	NY046000002 Sprinklers		3,500
	NY046000003 Landscaping/Paving		15,000	NY046000003 Landscaping/Paving		15,000
	NY046000003 Fencing		9,000	NY046000003 Sprinklers		9,000
	NY046000004 Landscaping/Paving		15,000	NY046000004 Landscaping/Paving		15,000
	NY046000004 Fencing		9,000	NY046000004 Sprinklers		9,000
	NY046000005 Landscaping/Paving		15,000	NY046000005 Landscaping/Paving		15,000
	NY046000005 Fencing		9,000	NY046000005 Sprinklers		9,000
	NY046000006 Landscaping/Paving		7,500	NY046000006 Landscaping/Paving		7,500
	NY046000006 Fencing		3,500	NY046000006 Sprinklers		3,500
Subtotal of Estimated Cost			\$	Subtotal of Estimated Cost		

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
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Expires 4/30/2011

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY	Work Statement for Year 2015			Work Statement for Year: 2016		
	FFY 2015			FFY 2016		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	NY046000007 Landscaping/Paving		7,500	NY046000007 Landscaping/Paving		7,500
Annual	NY046000007 Fencing		3,500	NY046000007 Sprinklers		3,500
Statement	NY046000008 Landscaping/Paving		7,500	NY046000008 Landscaping/Paving		7,500
	NY046000008 Fencing		3,500	NY046000008 Sprinklers		3,500
	NY046000009 Landscaping/Paving		7,500	NY046000009 Landscaping/Paving		7,500
	NY046000009 Fencing		3,500	NY046000009 Sprinklers		3,500
	NY046000010 Landscaping/Paving		7,500	NY046000010 Landscaping/Paving		7,500
	NY046000010 Fencing		3,500	NY046000010 Sprinklers		3,500
	NY046000011 Landscaping/Paving		7,500	NY046000011 Landscaping/Paving		7,500
	NY046000011 Fencing		3,500	NY046000011 Sprinklers		3,500
	1460 Dwelling Structures			1460 Dwelling Structures		
	NY046000001 Ext. Painting/Pointing/Waterproof		15,500	NY046000001 Emergency Pull Cords		15,500
	NY046000001 Upgrade Insulation		3,500	NY046000001 Intercoms		3,500
	NY046000001 Upgrade Bldg Entrance System		8,500	NY046000001 Upgrade Bathrooms		8,500
	NY046000001 Boilers		8,500	NY046000001 Boilers		8,500
	NY046000001 Ventilation		3,500	NY046000001 Windows		3,500
	NY046000002 Ext. Painting/Pointing/Waterproof		15,500	NY046000002 Emergency Pull Cords		15,500
	NY046000002 Upgrade Insulation		3,500	NY046000002 Intercoms		3,500
	NY046000002 Upgrade Bldg Entrance System		8,500	NY046000002 Upgrade Bathrooms		8,500
	Subtotal of Estimated Cost		\$	Subtotal of Estimated Cost		\$

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY	Work Statement for Year 2015		Work Statement for Year: 2016	
	FFY 2015		FFY 2016	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	NY046000002 Boilers	8,500	NY046000002 Boilers	8,500
Annual	NY046000002 Ventilation	3,500	NY046000002 Windows	3,500
Statement	NY046000003 Ext. Painting/Pointing/Waterproof	32,000	NY046000003 Emergency Pull Cords	32,000
	NY046000003 Upgrade Insulation	9,000	NY046000003 Intercoms	9,000
	NY046000003 Upgrade Bldg Entrance System	14,000	NY046000003 Upgrade Bathrooms	14,000
	NY046000003 Boilers	14,000	NY046000003 Boilers	14,000
	NY046000003 Ventilation	9,000	NY046000003 Windows	9,000
	NY046000004 Ext. Painting/Pointing/Waterproof	32,000	NY046000004 Emergency Pull Cords	32,000
	NY046000004 Upgrade Insulation	9,000	NY046000004 Intercoms	9,000
	NY046000004 Upgrade Bldg Entrance System	14,000	NY046000004 Upgrade Bathrooms	14,000
	NY046000004 Boilers	14,000	NY046000004 Boilers	14,000
	NY046000004 Ventilation	9,000	NY046000004 Windows	9,000
	NY046000005 Ext. Painting/Pointing/Waterproof	32,000	NY046000005 Emergency Pull Cords	32,000
	NY046000005 Upgrade Insulation	9,000	NY046000005 Intercoms	9,000
	NY046000005 Upgrade Bldg Entrance System	14,000	NY046000005 Upgrade Bathrooms	14,000
	NY046000005 Boilers	14,000	NY046000005 Boilers	14,000
	NY046000005 Ventilation	9,000	NY046000005 Windows	9,000
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part III: Supporting Pages – Management Needs Work Statement(s)					
Work Statement for Year 1 FFY	Work Statement for Year 2015			Work Statement for Year: 2016	
	FFY 2015			FFY 2016	
	Development Number/Name General Description of Major Work Categories	Estimated Cost		Development Number/Name General Description of Major Work Categories	Estimated Cost
See	NY046000006 Ext. Painting/Pointing/Waterproof	15,500		NY046000006 Emergency Pull Cords	15,500
Annual	NY046000006 Upgrade Insulation	3,500		NY046000006 Intercoms	3,500
Statement	NY046000006 Upgrade Bldg Entrance System	8,500		NY046000006 Upgrade Bathrooms	8,500
	NY046000006 Boilers	8,500		NY046000006 Boilers	8,500
	NY046000006 Ventilation	3,500		NY046000006 Windows	3,500
	NY046000007 Ext. Painting/Pointing/Waterproof	15,500		NY046000007 Emergency Pull Cords	15,500
	NY046000007 Upgrade Insulation	3,500		NY046000007 Intercoms	3,500
	NY046000007 Upgrade Bldg Entrance System	8,500		NY046000007 Upgrade Bathrooms	8,500
	NY046000007 Boilers	8,500		NY046000007 Boilers	8,500
	NY046000007 Ventilation	3,500		NY046000007 Windows	3,500
	NY046000008 Ext. Painting/Pointing/Waterproof	15,500		NY046000008 Emergency Pull Cords	15,500
	NY046000008 Upgrade Insulation	3,500		NY046000008 Intercoms	3,500
	NY046000008 Upgrade Bldg Entrance System	8,500		NY046000008 Upgrade Bathrooms	8,500
	NY046000008 Boilers	8,500		NY046000008 Boilers	8,500
	NY046000008 Ventilation	3,500		NY046000008 Windows	3,500
	NY046000009 Ext. Painting/Pointing/Waterproof	15,500		NY046000009 Emergency Pull Cords	15,500
	NY046000009 Upgrade Insulation	3,500		NY046000009 Intercoms	3,500
	NY046000009 Upgrade Bldg Entrance System	8,500		NY046000009 Upgrade Bathrooms	8,500
	NY046000009 Boilers	8,500		NY046000009 Boilers	8,500
	NY046000009 Ventilation	3,500		NY046000009 Windows	3,500
	Subtotal of Estimated Cost	\$		Subtotal of Estimated Cost	\$

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/20011

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY	Work Statement for Year FFY 2015			Work Statement for Year 2016		
	2015		Quantity	FFY 2016		Quantity
	Development Number/Name General Description of Major Work Categories	Estimated Cost		Development Number/Name General Description of Major Work Categories	Estimated Cost	
See	NY046000010 Ext/Painting/Pointing/Waterproof	15,500		NY046000010 Emergency Pull Cords	15,500	
Annual	NY046000010 Upgrade Insulation	3,500		NY046000010 Intercoms	3,500	
Statement	NY046000010 Upgrade Bldg Entrance System	8,500		NY046000010 Upgrade Bathrooms	8,500	
	NY046000010 Boilers	8,500		NY046000010 Boilers	8,500	
	NY046000010 Ventilation	3,500		NY046000010 Windows	3,500	
	NY046000011 Ext/Painting/Pointing/Waterproof	15,500		NY046000011 Emergency Pull Cords	15,500	
	NY046000011 Upgrade Insulation	3,500		NY046000011 Intercoms	3,500	
	NY046000011 Upgrade Bldg Entrance System	8,500		NY046000011 Upgrade Bathrooms	8,500	
	NY046000011 Boilers	8,500		NY046000011 Boilers	8,500	
	NY046000011 Ventilation	3,500		NY046000011 Windows	3,500	
	1465 Dwelling Equipment			1465 Dwelling Equipment		
	NY046000001 Stoves/Refrigerators/Generators	5,000		NY046000001 Stoves/Refrigerators/Generators	5,000	
	NY046000002 Stoves/Refrigerators/Generators	5,000		NY046000002 Stoves/Refrigerators/Generators	5,000	
	NY046000003 Stoves/Refrigerators/Generators	10,000		NY046000003 Stoves/Refrigerators/Generators	10,000	
	NY046000004 Stoves/Refrigerators/Generators	10,000		NY046000004 Stoves/Refrigerators/Generators	10,000	
	NY046000005 Stoves/Refrigerators/Generators	10,000		NY046000005 Stoves/Refrigerators/Generators	10,000	
	NY046000006 Stoves/Refrigerators/Generators	5,000		NY046000006 Stoves/Refrigerators/Generators	5,000	
	NY046000007 Stoves/Refrigerators/Generators	5,000		NY046000007 Stoves/Refrigerators/Generators	5,000	
	NY046000008 Stoves/Refrigerators/Generators	5,000		NY046000008 Stoves/Refrigerators/Generators	5,000	
	NY046000009 Stoves/Refrigerators/Generators	5,000		NY046000009 Stoves/Refrigerators/Generators	5,000	
	Subtotal of Estimated Cost			Subtotal of Estimated Cost		\$

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2001

Work Statement for Year 1 FFY	Work Statement for Year 2015			Work Statement for Year: 2016		
	FFY 2015			FFY 2016		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	NY046000010 Stoves/Refrigerators/Generators		5,000	NY046000010		5,000
Annual	NY046000011 Stoves/Refrigerators/Generators		5,000	NY046000011		5,000
Statement	1470 Non-Dwelling Structures			1470 Non-Dwelling Structures		
	NY046000001 Community Building		5,500	NY046000001 Community Building		5,500
	NY046000002 Community Building		5,500	NY046000002 Community Building		5,500
	NY046000003 Community/Mtce Building		11,000	NY046000003 Community/Mtce Building		11,000
	NY046000004 Community Building		11,000	NY046000004 Community Building		11,000
	NY046000005 Community/Admin Building		11,000	NY046000005 Community/Admin Building		11,000
	NY046000006 Community Building		5,500	NY046000006 Community Building		5,500
	NY046000007 Community Building		5,500	NY046000007 Community Building		5,500
	NY046000008 Community Building		5,500	NY046000008 Community Building		5,500
	NY046000009 Community Building		5,500	NY046000009 Community Building		5,500
	NY046000010 Community Building		5,500	NY046000010 Community Building		5,500
	NY046000011 Community Building		5,500	NY046000011 Community Building		5,500
	1475 Non-Dwelling Equipment			1475 Non-Dwelling Equipment		
	Maintenance/Office Equipment/Vehicles		25,000	Maintenance/Office Equipment/Vehicles		25,000
	Subtotal of Estimated Cost		\$	Subtotal of Estimated Cost		\$

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 8/31/2011

Part I: Summary					
PHA Name: Town of Hempstead Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY36P046501-09 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval: 09/15/2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	323,081	323,081	323,081	323,081
3	1408 Management Improvements	318,839	0	0	0
4	1410 Administration (may not exceed 10% of line 21)	161,540	161,449	161,449	161,449
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	40,946	167,378	167,378	167,378
8	1440 Site Acquisition				
9	1450 Site Improvement	70,000	39,808	39,808	39,808
10	1460 Dwelling Structures	506,000	700,926	700,926	700,926
11	1465.1 Dwelling Equipment—Nonexpendable	0	44,917	44,917	44,917
12	1470 Non-dwelling Structures	125,000	107,720	107,720	107,720
13	1475 Non-dwelling Equipment	70,000	70,127	70,127	70,127
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 08/31/2011

Part I: Summary

PHA Name: Town of Hempstead Housing Authority	Grant Type and Number Capital Fund Program Grant No: : NY36P046501-09 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2009 FFY of Grant Approval: 09/15/2009
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☐ **Type of Grant**
☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement (revision no:)
☐ Performance and Evaluation Report for Period Ending: ☒ Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	1,615,406	1,615,406	1,615,406	1,615,406
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director 	Date 10/13/2011	Signature of Public Housing Director	Date
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¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority			Grant Type and Number Capital Fund Program Grant No: : NY36P046501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY046000001	Replace Gutters, Leaders and Soffits	1460		8,000	0	0	0	
Newbridge Gardens	Replace Roofs and Building Canopies	1460		30,000	19,243	19,243	19,243	Complete
	Replace Air conditioning System	1470		10,000	0	0	0	
	Upgrade Infestation Prevention	1460		10,000	7,608	7,608	7,608	Complete
	Upgrade Landscaping	1450		0	628	628	628	Complete
	Upgrade Dwelling Equipment	1465		0	632	632	632	Complete
NY046000002	Upgrade Infestation Prevention	1460		10,000	12,938	12,938	12,938	Complete
Green Acres	Replace Building Roofs	1460		30,000	0	0	0	
	Upgrade & Refurbish Bldg Exterior	1470		30,000	2,576	2,576	2,576	Complete
	Repave Parking Lots	1450		10,000	0	0	0	
	Replace Gutters, Leaders and Soffits	1460		8,000	1,470	1,470	1,470	Complete
	Upgrade Landscaping	1450		0	5,767	5,767	5,767	Complete
	Upgrade Dwelling Equipment	1465		0	5,441	5,441	5,441	Complete
	Upgrade Community Building	1470		0	29,983	29,983	29,983	Complete
NY046000003	Upgrade Infestation Prevention	1460		10,000	8,263	8,263	8,263	Complete
Park Gardens	Replace Gutters, Leaders and Soffits	1460		8,000	0	0	0	
	Replace Windows	1460		30,000	0	0	0	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority			Grant Type and Number Capital Fund Program Grant No: NY36P046501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY046000003	Repave Parking Lots	1450		10,000	0	0	0	
Park Gardens	Replace Building Roofs	1460		30,000	0	0	0	
	Upgrade Landscaping	1450		0	1,772	1,772	1,772	Complete
	Upgrade and Refurbish Apartments	1460		0	12,201	12,201	12,201	Complete
NY046000003	Upgrade Infestation Prevention	1460		10,000	8,269	8,269	8,269	Complete
Centennial Gardens	Replace Building Roofs	1460		30,000	0	0	0	
	Replace Gutters, Leaders and Soffits	1460		8,000	0	0	0	
	Upgrade Landscaping	1450		0	329	329	329	Complete
	Upgrade and Refurbish Apartments	1460		0	14,945	14,945	14,945	Complete
NY046000004	Upgrade Infestation Prevention	1460		10,000	7,493	7,493	7,493	Complete
Bayview Gardens	Replace Gutters, Leaders and Soffits	1460		8,000	0	0	0	
	Refurbish Apartment Storm Doors	1460		5,000	0	0	0	
	Replace Apartment Entrance Doors	1460		10,000	0	0	0	
	Repave Parking Lot	1450		5,000	0	0	0	
	Upgrade Landscaping	1450		0	329	329	329	Complete
	Upgrade and Refurbish Apartments	1460		0	32,271	32,271	32,271	Complete
	Upgrade Dwelling Equipment	1465		0	3,549	3,549	3,549	Complete

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority			Grant Type and Number Capital Fund Program Grant No: : NY36P046501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY046000004	Replace Gutters, Leaders and Soffits	1460		8,000	0	0	0	
Inwood Gardens	Upgrade Heating System	1460		0	122,875	122,875	122,875	Complete
	Replace Apartment Storm Doors	1460		5,000	0	0	0	
	Upgrade Infestation Prevention	1460		10,000	4,342	4,342	4,342	Complete
	Upgrade Landscaping	1450		0	3,416	3,416	3,416	Complete
	Upgrade and Refurbish Apartments	1460		0	40,361	40,361	40,361	Complete
NY046000005	Upgrade Infestation Prevention	1460		10,000	2,575	2,575	2,575	Complete
Brookside Gardens	Replace Air Conditioning System	1470		30,000	0	0	0	
	Upgrade Community Building	1470		0	23,069	23,069	23,069	Complete
	Upgrade Heating System	1460		0	2,470	2,470	2,470	Complete
NY046000005	Upgrade Dwelling Equipment	1465		0	5,684	5,684	5,684	Complete
Meadowbrook Gdns	Upgrade Infestation Prevention	1460		10,000	14,433	14,433	14,433	Complete
	Repave Parking Lots	1450		10,000	0	0	0	
	Office Equipment	1475		0	2,024	2,024	2,024	Complete
	Upgrade Landscaping	1450		0	329	329	329	Complete

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² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority			Grant Type and Number Capital Fund Program Grant No: NY36P046501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY046000006	Upgrade Infestation Prevention	1460		10,000	2,508	2,508	2,508	Complete
Mill River Gardens	Repave Parking Lots	1450		10,000	0	0	0	
	Upgrade Landscaping	1450		0	3,465	3,465	3,465	Complete
	Upgrade Heating System	1460		0	46,069	46,069	46,069	Complete
	Upgrade Dwelling Equipment	1465		0	2,700	2,700	2,700	Complete
NY046000007	Upgrade Infestation Prevention	1460		10,000	4,723	4,723	4,723	Complete
Bellmore Gardens	Replace Windows	1460		30,000	0	0	0	
	Replace Air Conditioning System	1470		10,000	0	0	0	
	Upgrade and Refurbish Apartments	1460		0	8,188	8,188	8,188	Complete
	Repave Roofing	1460		0	4,410	4,410	4,410	Complete
	Upgrade Landscaping	1450		0	4,249	4,249	4,249	Complete
	Exterior Waterproofing	1460		0	20,992	20,992	20,992	Complete
	Upgrade Dwelling Equipment	1465		0	10,029	10,029	10,029	Complete
NY046000008	Replace Windows	1460		40,000	0	0	0	
Westover Gardens	Repave Parking Lots	1450		10,000	0	0	0	
	Upgrade Infestation Prevention	1460		10,000	6,823	6,823	6,823	Complete

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Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority			Grant Type and Number Capital Fund Program Grant No: : NY36P046501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY046000008	Upgrade Community Building	1470		0	26,578	26,578	26,578	Complete
Westover Gardens	Upgrade & Refurbish Bldg Exterior	1470		0	248,475	248,475	248,475	Complete
	Upgrade Site Drainage	1460		0	4,311	4,311	4,311	Complete
	Upgrade Security Intercom System	1460		0	17,656	17,656	17,656	Complete
	Upgrade Landscaping	1450		0	3,573	3,573	3,573	Complete
	Upgrade Dwelling Equipment	1465		0	2,301	2,301	2,301	Complete
NY046000009	Upgrade Infestation Prevention	1460		10,000	8,710	8,710	8,710	Complete
Dogwood Terrace	Replace Gutters	1460		5,000	0	0	0	
	Repave Parking Lots	1450		10,000	0	0	0	
	Replace Air Conditioning System	1470		10,000	0	0	0	
	Upgrade Dwelling Equipment	1465		0	6,100	6,100	6,100	Complete
	Upgrade Landscaping	1450		0	329	329	329	Complete
	Upgrade Community Building	1470		0	25,514	25,514	25,514	Complete

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Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority			Grant Type and Number Capital Fund Program Grant No: NY36P046501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY046000010	Replace Gutters, Leaders and Soffits	1460		8,000	0	0	0	
Eastover Gardens	Upgrade Infestation Prevention	1460		10,000	6,472	6,472	6,472	Complete
	Upgrade Landscaping	1450		0	2,397	2,397	2,397	Complete
	Upgrade Heating System	1460		0	1,960	1,960	1,960	Complete
	Upgrade Dwelling Equipment	1465		0	8,481	8,481	8,481	Complete
NY046000011								
Salisbury Gardens	Upgrade Infestation Prevention	1460		10,000	5,167	5,167	5,167	Complete
	Upgrade Drywall System	1460		25,000	0	0	0	
	Upgrade Landscaping	1450		0	12,896	12,896	12,896	Complete
	Upgrade and Refurbish Bldg Exterior	1460		30,000	2,705	2,705	2,705	Complete
	Upgrade Community Bldg Bathrooms	1470		35,000	0	0	0	0
PHA-Wide Operations	Provide Funds for Operation of CFP	1406		323,081	323,081	323,081	323,081	Complete
PHA-Wide Management	Provide Funding for Management Improvement and Tenant Services	1408		318,839	0	0	0	
PHA-Wide	Provide Necessary Advertisements	1410		5,000	6,449	6,449	6,449	Complete
Administration	Provide Necessary Staff Support	1410		156,540	155,000	155,000	155,000	Complete
Fees and Costs	HUD and State Requirements for A/E	1430		40,946	167,378	167,378	167,378	Complete
PHA Wide Non Dwelling Equipment	Replace Grounds Mtce Equipment	1475		15,000	22,173	22,173	22,173	Complete
	Replace Vehicles	1475		45,000	45,930	45,930	45,930	Complete
	Replace Office Equipment	1475		10,000	0	0	0	

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² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Town of Hempstead Housing Authority					Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
NY046000001 Newbridge Gardens	9/2010	3/2010	9/2012	12/2010	
NY046000002 Green Acres	9/2010	3/2010	9/2012	12/2010	
NY046000003 Park Gardens Centennial Gardens	9/2010	3/2010	9/2012	12/2010	
NY046000004 Bayview Gardens Inwood Gardens	9/2010	3/2010	9/2012	12/2010	
NY046000005 Brookside Gardens Meadowbrook Gardens	9/2010	3/2010	9/2012	12/2010	
NY046000006 Mill River Gardens	9/2010	3/2010	9/2012	12/2010	
NY046000007 Bellmore Gardens	9/2010	3/2010	9/2012	12/2010	
NY046000008 Westover Gardens	9/2010	3/2010	9/2012	12/2010	
NY046000009 Dogwood Terrace	9/2010	3/2010	9/2012	12/2010	
NY046000010 Eastover Gardens	9/2010	3/2010	9/2012	12/2010	
NY046000011 Salisbury Gardens	9/2010	3/2010	9/2012	12/2010	
PHA-Wide Mgt	9/2010	3/2010	9/2012	3/2010	
PHA-Wide Administration	9/2010	3/2010	9/2012	6/2010	
Fees and Costs	9/2010	3/2010	9/2012	6/2010	
PHA-Non Dwelling Equip	9/2010	3/2010	9/2012	6/2010	

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U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 08/31/2011

Part I: Summary					
PHA Name: Town of Hempstead Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY36P04650110 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2010 FFY of Grant Approval: 07/15/2010
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2011 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	324,777	324,777	324,777	324,777
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	161,540	95,681	95,681	95,681
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	50,000	79,957	79,957	46,717
8	1440 Site Acquisition				
9	1450 Site Improvement	383,000	110,039	110,039	77,455
10	1460 Dwelling Structures	556,089	541,840	541,840	496,019
11	1465.1 Dwelling Equipment—Nonexpendable	0	22,641	22,641	0
12	1470 Non-dwelling Structures	105,000	423,917	423,917	93,850
13	1475 Non-dwelling Equipment	35,000	31,045	31,045	31,045
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

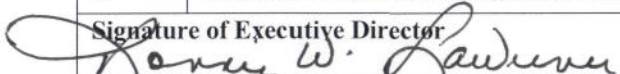
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
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U.S. Department of Housing and Urban Development
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Part I: Summary					
PHA Name: Town of Hempstead Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY36P04650110 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant:2010 FFY of Grant Approval: 07/15/2010	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2011 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)	0	14,491	0	0
20	Amount of Annual Grant:: (sum of lines 2 - 19)	1,615,406	1,629,897	1,629,897	1,165,544
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director 		Date 10/13/2011		Signature of Public Housing Director 	
				Date 	

¹ To be completed for the Performance and Evaluation Report.

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⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
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Part II: Supporting Pages								
PHA Name: Town of Hempstead Hosing Authority			Grant Type and Number Capital Fund Program Grant No: NY36P04650110 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY046000001	Upgrade Building Infestation Prevention	1460		10,000	11,212	11,212	11,212	Complete
Newbridge Gardens	Upgrade Parking Lot & Drainage	1450		20,000	0	0	0	
	Upgrade Landscaping & Seating Areas	1450		3,000	392	392	392	Complete
	Install Anti-microbial System	1470		5,000	0	0	0	
	Dwelling Equipment	1465		0	1,751	1,751	0	In Process
NY046000002	Upgrade Building Infestation Prevention	1460		10,000	20,095	20,095	20,095	Complete
Green Acres	Refurbish Apartments & Hallways	1460		10,000	68,265	68,265	68,265	Complete
	Upgrade & Refurbish Building Exterior	1460		20,000	0	0	0	
	Upgrade Parking Lots & Drainage	1450		25,000	0	0	0	
	Install Anti-microbial System	1470		5,000	0	0	0	
	Dwelling Equipment	1465		0	899	899	0	In Process
	Replace Hallway Flooring	1460		0	14,514	14,514	0	In Process
	Upgrade Landscaping	1450		0	2,780	2,780	2,780	Complete
NY046000003	Upgrade Landscaping	1450		0	2,940	2,940	2,940	Complete
Park Gardens	Upgrade Building Infestation Prevention	1460		10,000	28,017	28,017	28,017	Complete
	Refurbish Apartments & Hallways	1460		10,000	3,567	3,567	3,567	Complete
	Replace Hallway Flooring	1460		10,000	0	0	0	
	Upgrade Heating System	1460		20,000	0	0	0	
	Upgrade Building Exterior	1460		10,000	0	0	0	
	Upgrade Parking Lots & Drainage	1450		30,000	0	0	0	
	Install Anti-microbial System	1470		5,000	0	0	0	

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² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority			Grant Type and Number Capital Fund Program Grant No: NY36P04650110 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
	Dwelling Equipment	1465		0	1,254	1,254	0	In Process
NY046000003	Upgrade Building Infestation Prevention	1460		10,000	7,379	7,379	7,379	Complete
Centennial Gardens	Refurbish Apartments & Hallways	1460		20,000	0	0	0	
	Upgrade Parking Lots & Drainage	1450		20,000	0	0	0	
	Install Anti-microbial System	1470		5,000	0	0	0	
	Dwelling Equipment	1465		0	1,447	1,447	0	In Process
	Upgrade Landscaping	1450		0	980	980	980	Complete
	Exterior Lighting Upgrade	1450		0	32,584	32,584	0	In Process
NY0460000004	Upgrade Insulation	1460		0	62,483	62,483	62,483	Complete
Bayview Gardens	Upgrade Building Infestation Prevention	1460		10,000	11,393	11,393	11,393	Complete
	Replace Windows	1460		21,089	0	0	0	
	Refurbish Apartments	1460		5,000	11,230	11,230	11,230	Complete
	Replace Apartment Entrance Doors	1460		10,000	0	0	0	
	Upgrade Parking Lot & Drainage	1450		5,000	0	0	0	
	Dwelling Equipment	1465		0	1,838	1,838	0	In Process
	Fencing	1450		0	368	368	368	Complete
NY0460000004	Dwelling Equipment	1465		0	1,342	1,342	0	In Process
Inwood Gardens	Upgrade Building Infestation Prevention	1460		10,000	11,548	11,548	11,548	Complete
	Refurbish Apartments	1460		5,000	30,610	30,610	30,610	Complete
	Replace Apartment Entrance Doors	1460		10,000	0	0	0	
	Heating, Plumbing, Piping	1460		0	19,896	19,896	19,1896	Complete
	Fencing	1450		0	14,661	14,661	14,661	Complete

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U.S. Department of Housing and Urban Development
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Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority			Grant Type and Number Capital Fund Program Grant No: NY036P04650110 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY046000005	Upgrade Building Infestation Prevention	1460		10,000	17,439	17,439	17,439	Complete
Brookside Gardens	Refurbish Apartments	1460		10,000	0	0	0	
	Upgrade Hallway Flooring	1460		25,000	0	0	0	
	Heating, Plumbing, Piping	1460		0	17,564	17,564	17,564	Complete
	Dwelling Equipment	1465		0	2,045	2,045	0	In Process
	Upgrade Landscaping/Fencing	1450		0	11,613	11,613	11,613	Complete
	Upgrade Parking Lot & Drainage	1450		40,000	0	0	0	
	Install Anti-microbial System	1470		5,000	0	0	0	
NY046000005	Dwelling Equipment	1465		0	456	456	0	In Process
Meadow brook	Upgrade Landscaping	1450		0	2,254	2,254	2,254	Complete
Gardens	Upgrade Building Infestation Prevention	1460		10,000	14,066	14,066	14,066	Complete
	Refurbish Apartments & Hallways	1460		20,000	0	0	0	
	Upgrade Hallway Flooring	1460		20,000	0	0	0	
	Upgrade Parking Lots & Drainage	1450		10,000	0	0	0	
	Upgrade & Refurbish Office Interior	1470		25,000	0	0	0	
	Install Anti-microbial System	1470		5,000	0	0	0	
NY046000006	Dwelling Equipment	1465		0	2,180	2,180	0	In Process
Mill River Gardens	Upgrade Community Building A/C	1470		0	127,775	127,775	0	In Process
	Upgrade Building Infestation Prevention	1460		10,000	7,372	7,372	7,372	Complete
	Refurbish Apartments	1460		10,000	0	0	0	

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² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority			Grant Type and Number Capital Fund Program Grant No: NY36P04650110 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
	Upgrade Parking Lot & Drainage	1450		20,000	0	0	0	
	Replace Bulkhead	1450		100,000	0	0	0	
	Install Anti-microbial System	1470		5,000	0	0	0	
	Heating, Plumbing, Piping	1460		0	29,115	29,115	29,115	Complete
	Roofs, Gutters, Leaders	1460		0	2,315	2,315	2,315	Complete
	Upgrade Landscaping/Fencing	1450		0	8,506	8,506	8,506	Complete
	Upgrade Hallway Flooring	1460		0	15,608	15,608	0	In Process
NY046000007	Upgrade Building Infestation Prevention	1460		10,000	16,717	16,717	16,717	Complete
Bellmore Gardens	Refurbish Apartments	1460		10,000	0	0	0	
	Upgrade Hallway Flooring	1460		10,000	15,699	15,699	0	In Process
	Upgrade Heating System	1460		40,000	0	0	0	
	Install Anti-microbial System	1470		5,000	0	0	0	
	Upgrade Community	1470		0	21,658	21,658	21,658	Complete
	Dwelling Equipment	1465		0	627	627	0	In Process
	Upgrade Landscaping/Fencing	1450		0	5,977	5,977	5,977	Complete
NY046000008	Upgrade Air Conditioning System	1470		0	81,225	81,225	0	In Process
Westover Gardens	Upgrade Building Infestation Prevention	1460		10,000	15,456	15,456	15,456	Complete
	Refurbish Apartments & Hallways	1460		30,000	0	0	0	
	Install Anti-microbial System	1470		5,000	0	0	0	
	Dwelling Equipment	1465		0	1,353	1,353	0	In Process
	Upgrade Landscaping/Fencing	1450		0	2,303	2,303	2,303	Complete
	Refurbish Mansard & Bldg. Exterior	1460		0	2,940	2,940	2,940	Complete
	Heating, Plumbing, Piping	1460		0	2,776	2,776	2,776	Complete

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Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
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Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority			Grant Type and Number Capital Fund Program Grant No: NY36P04650110 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY046000009	Heating, Plumbing, Piping	1460		0	26,862	26,862	26,862	In Process
Dogwood Terrace	Upgrade Building Infestation Prevention	1460		10,000	12,733	12,733	12,733	Complete
	Refurbish Apartments & Hallways	1460		30,000	0	0	0	
	Upgrade Building Exterior	1460		30,000	0	0	0	
	Upgrade Parking Lot & Drainage	1450		20,000	0	0	0	
	Enlarge Parking Lot	1450		30,000	0	0	0	
	Install Anti-microbial System	1470		5,000	0	0	0	
	Upgrade Landscaping/Fencing	1450		0	16,057	16,057	16,057	Complete
	Dwelling Equipment	1465		0	2,096	2,096	0	In Process
NY046000010	Upgrade Building Infestation Prevention	1460		10,000	29,137	29,137	29,137	Complete
Eastover Gardens	Refurbish Apartments & Hallways	1460		10,000	0	0	0	Complete
	Enlarge Parking Lot & Drainage	1450		30,000	0	0	0	
	Repave Walkways & Parking Lot	1450		30,000	0	0	0	
	Upgrade Air Conditioning System	1470		20,000	151,942	151,942	30,875	In Process
	Install Anti-microbial System	1470		5,000	0	0	0	
	Heating, Plumbing, Piping	1460		0	2,967	2,967	2,967	Complete
	Upgrade Community Building	1470		0	41,317	41,317	41,317	Complete
	Dwelling Equipment	1465		0	3,098	3,098	0	In Process
	Upgrade Landscaping/Fencing	1450		0	2,793	2,793	2,793	Complete

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Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority			Grant Type and Number Capital Fund Program Grant No: NY36P04650110 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY0460000011	Upgrade Landscaping/Fencing	1450		0	5,831	5,831	5,831	Complete
Salisbury Gardens	Dwelling Equipment	1465		0	2,255	2,255	0	In Process
	Upgrade Building Infestation Prevention	1460		10,000	12,865	12,865	12,865	Complete
	Install Anti-microbial System	1470		5,000	0	0	0	
PHA-Wide Operations	Provide Funds for Operation of CFP Program	1406		324,777	324,777	324,777	324,777	Complete
PHA-Wide	Provide Necessary Advertisements	1410		5,000	255	255	255	Complete
Administration	Provide Necessary Support Staff	1410		156,540	95,426	95,426	95,426	Complete
Fees & Costs	HUD Required A & E Services	1430		50,000	79,957	79,957	46,718	In Process
PHA-Wide	Replace Grounds Maintenance Equipment	1475		15,000	0	0	0	
Non-Dwelling	Replace Building Maintenance Equipment	1475		15,000	0	0	0	
Equipment	Replace Office Equipment	1475		5,000	0	0	0	
	Replace Vehicles	1475		0	31,045	31,045	31,045	Complete
Contingency	Contingency	1502		0	0	0	0	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Town of Hempstead Housing Authority				Federal FFY of Grant: 2010	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
NY046000001 Newbridge Gardens	9/2012	12/2010	9/2014		
NY046000002 Green Acres	9/2012	12/2010	9/2014		
NY046000003 Park Gardens Centennial Gardens	9/2012	12/2010	9/2014		
NY046000004 Bayview Gardens Inwood Gardens	9/2012	12/2010	9/2014		
NY046000005 Brookside Gardens Meadowbrook Gardens	9/2012	12/2010	9/2014		
NY046000006 Mill River Gardens	9/2012	12/2010	9/2014		
NY046000007 Bellmore Gardens	9/2012	12/2010	9/2014		
NY046000008 Westover Gardens	9/2012	12/2010	9/2014		

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Town of Hempstead Housing Authority					Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
NY046000009 Dogwood Terrace	9/2012	12/2010	9/2014		
NY046000010 Eastover Gardens	9/2012	12/2010	9/2014		
NY046000011 Salisbury Gardens	9/2012	12/2010	9/2014		
PHA Wide Operations	9/2012	12/2010	9/2014	3/31/2011	
Non Dwelling Equipment	9/2012	12/2010	9/2014	3/31/2011	

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 8/31/2011

Part I: Summary					
PHA Name: Town of Hempstead Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY36S046501-09 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: ARRA FFY of Grant Approval: 2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2011 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	43,786	38,242	38,242	14,273
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	82,863	80,985	80,985	80,985
8	1440 Site Acquisition				
9	1450 Site Improvement	516,608	669,667	669,667	516,608
10	1460 Dwelling Structures	583,300	585,719	585,719	395,488
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	828,964	680,908	680,908	680,908
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

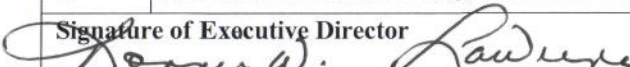
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 08/31/2011

Part I: Summary					
PHA Name: Town of Hempstead Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY036S046501-09 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: arra FFY of Grant Approval: 2009	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2011 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	2,055,521	2,055,521	2,055,521	1,688,262
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures	680,908			
Signature of Executive Director 		Date 10/13/2011		Signature of Public Housing Director 	
				Date 	

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority			Grant Type and Number Capital Fund Program Grant No: NY036S046501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY046000001	Upgrade and Refurbish Apartments	1460	59	58,640	58,359	58,359	55,986	In Process
Newbridge Gardens	And Hallways							
	Install Chair Rails in Hallways	1470	10	0	1,218	1,218	1,218	Complete
	Replace Air Conditioning System with New Energy Star Rated System	1470	1	119,000	85,025	85,025	85,025	Complete
	Repave Parking Lot and Walkways	1450	1	0	5,072	5,072	0	In Process
NY046000002	Replace Air Conditioning System with New Energy Star Rated System	1470	1	129,240	104,637	104,637	104,637	Complete
Green Acres								
	Repave Parking Lot and Walkways	1450	1	0	19,313	19,313	0	In Process
NY046000003	Replace Air Conditioning System with New Energy Star Rated System	1470	1	109,800	91,532	91,532	91,532	Complete
Park Gardens								
	Upgrade and Refurbish Apartments And Hallways	1460	53	0	71,099	71,099	0	In Process
NY046000003	Upgrade and Refurbish Apartments And Hallways	1460	35	0	64,719	64,719	62,738	In Process
Centennial Gardens								
	Install Chair Rails in Hallways	1470	4	0	1,702	1,702	1,702	Complete
	Repave Parking Lot and Walkways	1450	1	0	12,315	12,315	0	In Process

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement. ² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority			Grant Type and Number Capital Fund Program Grant No: NY36S046501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: ARRA		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY046000004	Upgrade and Refurbish Apartments	1460	24	36,330	24,470	24,470	23,721	In Process
Bayview Gardens	Repave Parking Lot and Walkways	1450	1	0	9,931	9,931	0	In Process
NY046000004	Upgrade and Refurbish Apartments	1460	26	37,730	25,137	25,137	24,367	In Process
Inwood Gardens	Repave Parking Lot and Walkways	1450	1	344,740	351,776	351,776	344,740	In Process
NY046000005	Replace Air Conditioning System with New Energy Star Rated System	1470	1	129,350	120,175	120,175	120,175	Complete
Brookside Gardens	Upgrade and Refurbish Apartments And Hallways	1460	33	47,190	43,243	43,243	42,118	In Process
	Install Chair Rails in Hallways	1470	5	0	875	875	875	Complete
	Repave Parking Lot and Walkways	1450	1	0	9,375	9,375	0	In Process
NY046000005	Replace Air Conditioning System with New Energy Star Rated System	1470	1	106,400	97,565	97,565	97,565	Complete
Meadowbrook Gdns	Upgrade and Refurbish Hallways	1460	10	0	38,220	38,220	0	In Process
	Repave Parking Lot and Walkways	1450	1	0	44,527	44,527	0	In Process
NY046000006	Upgrade and Refurbish Apartments And Hallways	1460	53	68,275	66,571	66,571	65,428	In Process
Mill River Gardens	Install Chair Rails in Hallways	1470		0	2,419	2,419	2,419	Complete
	Repave Parking Lot and Walkways	1450	1	0	31,171	31,171	0	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement. ² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Town of Hempstead Housing Authority			Grant Type and Number Capital Fund Program Grant No: NY036S046501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY046000007 Bellmore Gardens	Upgrade and Refurbish Apartments And Hallways	1460	53	54,440	53,694	53,694	41,250	In Process
	Install Chair Rails in Hallways	1470	5	0	2,419	2,419	2,419	Complete
	Replace Air Conditioning System with New Energy Star Rated System	1470	1	90,000	59,660	59,660	59,660	Complete
	Repave Parking Lots and Walkways New Energy Star Rated System	1450	1	171,868	175,375	175,375	171,868	In Process
NY046000008 Westover Gardens	Upgrade and Refurbish Hallways	1460	13	55,419	57,838	57,838	0	In Process
	Install Chair Rails in Hallways	1470	13	2,419	0	0	0	
	Repave Parking Lots and Walkways	1450	1	0	8,563	8,563	0	In Process
NY046000009 Dogwood Terrace	Replace Air Conditioning System with New Energy Star Rated System	1470	1	119,850	111,293	111,293	111,293	Complete

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Town of Hempstead Housing Authority				Federal FFY of Grant: ARRA	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
NY046000001 Newbridge Gardens	03/2010	03/2010	03/2012		
NY046000002 Green Acres	03/2010	03/2010	03/2012		
NY046000003 Park Gardens	03/2010	03/2010	03/2012		
NY046000003 Centennial Gardens	03/2010	12/2009	03/2012		
NY046000004 Bayview Gardens	03/2010	12/2009	03/2012		
NY046000004 Inwood Gardens	03/2010	12/2009	03/2012		
NY046000005 Brookside Gardens	03/2010	3/2010	03/2012		
NY046000005 Meadowbrook Gardens	03/2010	3/2010	03/2012		
NY046000006 Mill River Gardens	03/2010	12/2009	03/2012		
NY046000007 Bellmore Gardens	03/2010	3/2010	03/2012		
NY046000008 Westover Gardens	03/2010	3/2010	03/2012		
NY046000009 Dogwood Terrace	03/2010	3/2010	03/2012		

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

form HUD-50075.1 (4/2008)

PHA Certifications of Compliance with PHA Plans and Related R e g u l a t i o n s

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 08/30/2011

PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the x 5-Year and/or x Annual PHA Plan for the PHA fiscal year beginning 2012 hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.

13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
 - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
 - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
 - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.


TOWN OF HEMPSTEAD HOUSING AUTHORITY
PHA Name

NY 046
PHA Number/HA Code

xx 5-Year PHA Plan for Fiscal Years 2012- 2016

✕ Annual PHA Plan for Fiscal Years 2012-20

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
FRANK J. SARACINO	CHAIRMAN, BOARD OF COMMISSIONERS
Signature	Date
	10/11/2011

Certification of Payments to Influence Federal Transactions

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 01/31/2014)

Applicant Name

TOWN OF HEMPSTEAD HOUSING AUTHORITY

Program/Activity Receiving Federal Grant Funding

CAPITAL FUND PROGRAM

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all sub recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.
Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

FRANK J. SARACINO

Title

CHAIRMAN, BOARD OF COMMISSIONERS

Signature



Date (mm/dd/yyyy)

10/11/2011

Previous edition is obsolete form HUD 50071 (3/98)

ref. Handbooks 7417.1, 7475.13, 7485.1, & 7485.3

Certification for a Drug-Free Workplace

U.S. Department of Housing
and Urban Development

Applicant Name

TOWN OF HEMPSTEAD HOUSING AUTHORITY

Program/Activity Receiving Federal Grant Funding

CAPITAL FUND PROGRAM

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. **Sites for Work Performance.** The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Check here ☐ if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.

(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

FRANK J. SARACINO

Title

CHAIRMAN, BOARD OF COMMISSIONERS

Signature

X

Date

10/11/2011

form HUD-50070 (3/98)

ref. Handbooks 7417.1, 7475.13, 7485.1 & .3

TOWN OF HEMPSTEAD HOUSING AUTHORITY

760 JERUSALEM AVENUE

UNIONDALE, NEW YORK 11553

NY046-1	NEWBRIDGE GARDENS	555 N. NEWBRIDGE ROAD LEVITTOWN, NEW YORK 11756
NY046-2	GREEN ACRES	400 FLOWER ROAD VALLEY STREAM, NEW YORK 11580
NY-046-3	PARK GARDENS	835/840 UNIONDALE AVENUE UNIONDALE, NEW YORK 11553
NY046-4	BAYVIEW GARDENS	339 BAYVIEW AVENUE INWOOD, NEW YORK 11096
NY046-5	INWOOD GARDENS	255 LAWRENCE AVENUE INWOOD, NEW YORK 11096
NY046-6	BROOKSIDE GARDENS	1810 N. GRAND AVENUE BALDWIN, NEW YORK 11510
NY046-7	MEADOWBROOK GARDENS	750 JERUSALEM AVENUE UNIONDALE, NEW YORK 11553
NY046-8	MILL RIVER GARDENS	2900 ROCKAWAY AVENUE OCEANSIDE, NEW YORK 11572
NY046-9	BELLMORE GARDENS	2000/2025 BELLMORE AVENUE BELLMORE, NEW YORK 11710
NY046-10	WESTOVER GARDENS	132/158 ELMONT ROAD ELMONT, NEW YORK 11003
NY046-11	DOGWOOD TERRACE	1170/1182 MARTHA PLACE FRANKLIN SQUARE, NEW YORK 11010
NY046-12	EASTOVER GARDENS	11510 SEAMAN'S NECK ROAD WANTAGH, NEW YORK 11793
NY046-14	CENTENNIAL GARDENS	2 BABYLON TURNPIKE ROOSEVELT, NEW YORK 11575
NY046-17	SALISBURY GARDENS	460 SALISBURY PARK DRIVE WESTBURY, NEW YORK 11590

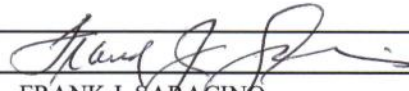
DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

(See reverse for public burden disclosure.)

Approved by OMB

0348-0046

1. Type of Federal Action: <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance		2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award		3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____	
4. Name and Address of Reporting Entity: <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known: 4c			5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:		
6. Federal Department/Agency:			7. Federal Program Name/Description: CFDA Number, if applicable: _____		
8. Federal Action Number, if known:			9. Award Amount, if known: \$		
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI):			b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):		
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.			Signature:  Print Name: FRANK J. SARACINO Title: CHAIRMAN, BOARD OF COMMISSIONERS Telephone No.: 516-485-9666 Date: 10/11/11		
Federal Use Only:			Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)		

**COMMENTS OF THE RESIDENT ADVISORY BOARD
and
COMMENTS AT PUBLIC HEARING**

Question: Is it possible to get additional parking at Brookside Gardens?

Answer: Unfortunately, there is no land where we can add spaces; however, is possible, we will be assigning tenants permanent parking spaces. We have recently tried this at another site where parking was a problem and have found this to be a very effective solution. Once each tenant has been assigned a space, any remaining spaces are marked for visitors.

Question: When will the apartments in Bellmore get new windows?

Answer: We've just spent a lot of money in Bellmore. We painted the apartments and hallways, which I believe was raised last year. We replaced the air conditioning system in the community building to a much more energy efficient one. We replaced the blacktop walkways with new concrete sidewalks and we repaved the parking lots. The weatherization grant for Bellmore that we had hoped to receive last year came through this year. The grant contract has just been signed and the work should begin very shortly. Included in the funding is the replacement the windows, refrigerators, boilers, light fixtures. As I mentioned in responding to the last question, we expect to be assigning parking spaces at Bellmore, as well.

Question: Assigned parking spaces could be used at Salisbury Gardens, as well.

Answer: Let me just say to all of you that we expect to be assigning spaces at all sites in the very near future.

Question: The racks on the new refrigerators received from LIPA do not fit properly.

Answer: Please contact LIPA directly if you have any questions regarding the refrigerators you received as part of a LIPA program.

Question: Thermostats should be placed in all apartments.

Answer: All apartments do have thermostats, with the exception of your site. We are looking into allocating the funds to install them there, as well.

Question: I want to thank you for all your hard work, including painting our apartments and hallways. Everything looks beautiful. Please check, though. The paint in the hallway appears to be chipping.

Answer: Thank you for letting us know. We will check and do some touch up work.